



INVOICE

BILL TO:
Priority1

INVOICE DATE: 02/28/2025
INVOICE #: R79321
TERMS: NET 30
DUE DATE: 03/28/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
02/27/2025		9070 General Dr, Plymouth, MI 48170 - 1375 East Main Street, Danville, IN 46122			
		Freight Income	1	\$900.00	\$900.00

TOTAL
\$900.00

PLEASE NOTE

The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS) and all payments hereunder are to be directed to the assignee at the address noted below. Remittances to other than CFS do not constitute payment of this invoice. CFS must be given notification of any claims, agreements or merchandise returns which would affect the payment of all or part of this Invoice on the due date.

COMPASS FUNDING SOLUTIONS LLC
P.O.BOX 205154
DALLAS, TX 75320-5154
Tel: 844-899-8092

Carrier Load Tender

Reference: 60109875619 (BOL)

Carrier: ROYAL3 INC. (944686)

Contact: joey (joey@ROYAL3INC.COM)

Phone: 321 465 5667

Fax:

Tender: 02/27/2025 15:12

Contact: Trey Hobson

Phone: (501) 481-5798

Email: trey.hobson@priority1.com

Main Line: 501-372-3925

Bill To:	Priority 1 Inc. (P.O. Box 398) North Little Rock, AR 72115
Equipment:	53' Dry Van ,
Service Type:	Full

Stop 1 Pick

Thursday, February 27, 2025 08:00 - 14:30	Total Weight:	20687.00 lb	Total Quantity:	16
Pace, Inc. (9070 General Dr) Plymouth, MI 48170				
Contact: Phone: +17344536258				
Packaging: 6 Crate(s)	Total Weight: 7,268 lbs	Dimensions: " x " x "	Linear Feet: 0	Description: Mowers
Packaging: 10 Crate(s)	Total Weight: 13,419 lbs	Dimensions: " x " x "	Linear Feet: 0	Description: Mowers
Carrier Notes:				
Special Instructions:				

Stop 2 Drop

Friday, February 28, 2025 08:00 - 16:00	Total Weight:	0 lb	Total Quantity:	
Formula K Equipment (54358 North Main Street) Mattawan, MI 49071				
Contact: Mike Phone: +12696683864				
Carrier Notes:				
Special Instructions:				

Stop 3 Drop

Friday, February 28, 2025 08:00 - 16:30	Total Weight:	0 lb	Total Quantity:	
Edwards Equipment Company (1375 East Main Street) Danville, IN 46122				
Contact: Sarah Phone: +13177456427				
Carrier Notes:				
Special Instructions:				

Freight Terms

Charge Details			
Description	Rate		Charge
Line Haul	900.00	Flat Rate	\$900.00 USD
Total:			\$900.00 USD

Freight Terms: \$900.00 USD Third Party (lb)

References

Order: UR9N9/01 UR9P0/00 UN8V0/00
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Carrier Instructions

Most receivers do not have docks, they will be pulling the freight to the back of the trailer for offload. Metal Floors Preferred. Deliveries to General Driver need to deliver by noon to get unloaded

Thank you for doing business with Priority 1.

DRIVERS NAME: _____

TRUCK #: _____

TRAILER #: _____

DRIVER CELL#: _____

DISPATCHER / PRIORITY 1

Joey Cimbaljeric

CARRIER SIGNATURE

All invoices & PODs are to be sent to Priority 1 within 72 hours of delivery. Please email invoice and POD to: tlap@priority1.com. Please provide Priority 1's reference number on your invoice.

BOL NO: 60109875619

BILL OF LADING		Carrier: ROYALS INC., 944686	
Shipper		Pickup Date: 02/27/2025	
Face, Inc. 9070 General Dr. Plymouth, MI 48170 P: +1 (734) 453-6258		Origin Terminal	
		Plymouth, MI 48170	
		Phone: P: +1 (734) 453-6258	
		Destination Terminal	
		Mattawan, MI 49071	
		Phone: P: +1 (269) 668-3864	
Consignee		Truckload Identifiers	
Formula K Equipment 54358 North Main Street Mattawan, MI 49071 Mike P: +1 (269) 668-3864		Order: URSN9/01 URSPO 00 4846700	
		Tracker Tools Id: 26557266	
		Pickup Hours: 08:00 - 14:30 Delivery Hours: 08:00 - 16:00	
3rd Party Bill To			
Priority 1 Inc. P.O. Box 350 North Little Rock, AR 72115 P: +1 (501) 371-3814			
Special instructions: <i>Scal # 46164330</i>			
Freight Terms: <input type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party			
Units	Type	Weight	Dimensions
0	Crate	7,268 lbs	
0		7,268 lbs	
HM			
Item Description			
Mowers			
Grand Totals			
Where the bill is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.			
Remit COD to:			
Collect _____ Prepaid _____ Customer check acceptable _____ COD Amount: \$			
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B)			
Received, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper on request and to all applicable state and federal regulations.		Trailer Loaded:	Freight Counted:
		<input checked="" type="checkbox"/> by Shipper <input type="checkbox"/> by Driver	<input type="checkbox"/> by Shipper <input type="checkbox"/> by Driver
		The Carrier shall not make delivery of this shipment without payment of and all other lawful charges.	
Shipper Signature / Date		Consignee Signature / Date	
This is to certify that the above named materials are properly classified, packaged, marked and labeled and in proper condition for transportation according to the applicable regulations of the Department of Transportation.		This is to certify that the above named materials are properly classified, packaged, marked and labeled and in proper condition for transportation according to the applicable regulations of the Department of Transportation.	
Shipper: <i>[Signature]</i> Time In: _____ Time Out: _____		Consignee: <i>[Signature]</i> Time In: _____ Time Out: _____	
Carrier Signature / Date			
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.			
Carrier: _____			

BOL NO: 60109875619

Dose

BILL OF LADING

Carrier: ROYAL INC., 944686

Shipper

Pickup Date: 02/27/2025

Pace, Inc.
9070 General Dr
Plymouth, MI 48170
P: +1 (734) 453-6258

Origin Terminal

Plymouth, MI 48170
Phone: P: +1 (734) 453-6258

Destination Terminal

Darville, IN 46122
Phone: P: +1 (317) 745-6427

Consignee

Truckload Identifiers

Edwards Equipment Company
1375 East Main Street
Darville, IN 46122
Sarah
P: +1 (317) 745-6427

Order: ~~UN8V0/00~~ UN8V0/00
Trucker Tools Id: 28557266
Pickup Hours: 08:00 - 14:30
Delivery Hours: 08:00 - 16:30

3rd Party Bill To

Priority 1 Inc.
P.O. Box 358
North Little Rock, AR 72115
P: +1 (501) 371-9814

Special Instructions:

*Scal #46464331*Freight Terms: ☐ Prepaid ☐ Collect ☒ 3rd Party

Units	Type	Weight	Dimensions	HM	Item Description
10	Crate	12,419 lbs			Mowers
10		12,419 lbs			Grand Totals

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.

Remit COD to:

Collect ☐ Prepaid ☐ Customer check acceptable ☐ COD Amount: \$

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B)

Received, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

Trailer Loaded:

☒ by Shipper
☐ by Driver

Freight Counted:

☐ by Shipper
☐ by Driver

The Carrier shall not make delivery of this shipment without payment of and all other lawful charges.

Shipper: _____

Shipper Signature / Date

Consignee Signature / Date

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Shipper: _____

Consignee: _____

Time In: _____ Time Out: _____

Time In: _____ Time Out: _____

Carrier Signature / Date

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.

Carrier: _____

*Noah Wilson**Noah Wilson**02/28/25*

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